PLEASE PRINT

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS

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APR 30 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

(RSA Chapter 15)

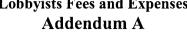
I. Name of Lob	byist(s) <u>Douglas L. Patc</u>	h		DEPARTMENT O
II. Name of lob	byist's partnership, firm or	corporation, if any	:	
Orr & Reno	. P.A.			
	(Name of partnership, firm or	corporation)		
_45 S. Main	Street, P.O. Box 3550	Concord	NH	03302
Business Address		(Town/City)	(State)	(Zip Code)
(603) <u>224-23</u> (Teleph		(Fax)	e-mail dpatch@c	orr-reno.com
	nent covers: (Choose one – fi ense transactions which are			y file a separate report for
All reportab	le transactions occurring in th	e months prior to the	e reporting date relative to the	following client:
New Er	ngland Backflow			
<u>OR</u>	(Full Name of Client as	it appears on the Lobb	yist Registration Form)	
☐ All reportable	e transactions by the lobbyist particular client.	(including the lobby	ist's family), or the lobbying	firm listed below which are
IV. Date of Rep			July 25, 2018 🗌	
Reports cover:	activity from date of registrati		activity from 4/1/18 to 6/30/18	
	October 31, 2018 activity from 7/1/18 to 9/		January 30, 2019 activity from 10/1/18 to 12/31/1	18
	e been no fees received an ecked, complete just this form 3301.			
VI. Check if ad	ditional reports are attache	d:		
	received fees or made expend		Addendum A- Fees and Ex	penses
•	paid an honorarium or reimbi	<u>-</u>		
☐ If you, your	firm, or your family has mad	e political contributi	ons, you must file Addendur	n C-Political Contribution
I have read RSA	nt/Affirmation by Lobbyist 15, RSA 15-B, RSA 14-C at the best of my knowledge an		by swear or affirm that the fo	pregoing information is true
	1 tas		04/25/18	
(Signature of lo	obyist)		(Date	:)
Douglas L.				
(Print Name of				

P E A \mathbf{S} E P R I \mathbf{N}

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STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A



(RSA Chapter 15:6)

I. Name of Lobbyist(s) Douglas L. Patch		
II. Name of lobbyist's partnership, firm or corporation, if any:		
Orr & Reno, P.A. (Name of partnership, firm or corporation)		
III. Name of Client New England Backflow	Date04	:/25/18
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, governmen including research, monitoring legislation, and related legal work. The gr reduced by any expenses:	t relations, or p	oublic relations service
a) Total of all fees received in this reporting period	a) \$	4,837.50
b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar y	b) \$ ear)	0.00
c) Total of all fees received to date (Add lines a and b)	c) \$	4,837.50
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$	0.00
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to refees. Separate reports are to be filed for expenditures made relative to each the lobbyist(s)/firm that are unrelated to any one client a separate report Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office expenses where the expenditure was of \$25.00 or less (for examp lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value great restaurant expenses for a legislative reception). Expenses for honorariums contributions will be reported on separate addendums and should not be reported.	client and if exmay be filed to e aggregate to expenses; (b) the le: meals pureless than \$10 the ed with a value orting period of ue of greater than \$25, but, expense rein	spenditures are made befor the lobbyist(s)/firm tal of all expenses paine aggregate total of a hased during a busines at is given to the person of \$25.00 or less); and figreater than \$25.00 fe han \$25, purchase of ut not greater than \$56 abursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$	50.00
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$	0.00
c) Total of all itemized expenditures reported in detail in section VI.	c) \$	0.00

d) Total expenses for this reporting period	d) \$	5
(Add lines a, b and c)		
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$	
f) Total of all expenses year to date	f) \$	5
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from period, including by whom paid or to whom charged.	lobbying fees duri	ng this repo
Paid to:	Amount:	
	\$	
	\$	
	\$	
	\$	
	\$	
	\$	
Sworn Statement/Affirmation by Lobbyist		
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affir is true and complete to the best of my knowledge and belief.	m that the forego $04/25/18$	oing inform
(Signature of lobbyist)	(Date))
Douglas L. Patch		

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying parts	nership, firm, or corpo	oration: Orr & Reno, P.	A
Name of Client (leave b	lank if Statement is fo	or the partnership, firm, or	corporation and not related to any
particular client): New	England Backflow		
			
Date of Report (check of	ne):		
April 25, 2018 ☒	July 25, 2018 □	October 31, 2018 □	January 30, 2019 □
			d Expenses described above, and amber of Addendum forms being
_1 Addendum A(s)			
Addendum B(s)			
Addendum C(s)			
I hereby swear or affirm complete to the best of 1		lief.	at and each Addendum is true and
(Signature of lobbyist)			(Date)
7			
Douglas L. Patch			
(Print Name of lobbyist))		